

HAND DELIVERED

FEC
FORM 1

STATEMENT OF
ORGANIZATION

FEDERAL ELECTION
COMMISSION
PUBLIC DISCLOSURE
DIVISION

2013 NOV 27 AM 10:47
Office Use Only

1. NAME OF
COMMITTEE (in full)

☐ (Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

José Luis Fernández For Congress

ADDRESS (number and street)

144 North 7th street

☐ (Check if address
is changed)

Brooklyn

NY

11211

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

☐ (Check if address
is changed)

JLfernandezforcongress@gmail.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐ (Check if address
is changed)

joselfernandez.com

2. DATE

11 / 27 / 2013

3. FEC IDENTIFICATION NUMBER

C

4. IS THIS STATEMENT



NEW (N)

OR



AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Beatriz Fernandez De Mardas

Signature of Treasurer

Beatriz F. Mardas

Date

11 / 27 / 2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office
Use
Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 02/2009)

13031141907

5. TYPE OF COMMITTEE

Candidate Committee:

- (a) ☒ This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) ☐ This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate

José Luis Fernández

Candidate Party Affiliation

REP

Office Sought:

☒

House

☐

Senate

☐

President

State

NY

District

07

- (c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

Party Committee:

- (d) ☐ This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) ☐ This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
- | | | |
|--|--|---|
| <input type="checkbox"/> Corporation | <input type="checkbox"/> Corporation w/o Capital Stock | <input type="checkbox"/> Labor Organization |
| <input type="checkbox"/> Membership Organization | <input type="checkbox"/> Trade Association | <input type="checkbox"/> Cooperative |
- ☐ In addition, this committee is a Lobbyist/Registrant PAC.
- (f) ☐ This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
- ☐ In addition, this committee is a Lobbyist/Registrant PAC.
- ☐ In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

- | | | | |
|----|----------------------|---------------|---|
| 1. | <input type="text"/> | FEC ID number | C |
| 2. | <input type="text"/> | FEC ID number | C |
| 3. | <input type="text"/> | FEC ID number | C |
| 4. | <input type="text"/> | FEC ID number | C |

13031141903

Write or Type Committee Name

José Luis Fernández For Congress

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address

CITY

STATE

ZIP CODE

Relationship: ☐ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

Beatriz Fernandez de Mangles

Mailing Address

1357 Avenida Ashford

PMB 179

San Juan

PR

00907

Title or Position

CITY

STATE

ZIP CODE

CPA

Telephone number

787

- 777

- 8205

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name
of Treasurer

Beatriz Fernández de Mangles

Mailing Address

1357 Avenida Ashford

PMB 179

San Juan

PR

00907

Title or Position

CITY

STATE

ZIP CODE

CPA

Telephone number

787

- 777

- 8205

Full Name of
Designated
Agent

Jesus Martinez

Mailing Address

1302 Rhode Island street NW Unit 1

Washington

CITY

DC

STATE

20009

ZIP CODE

Title or Position

Consultant

Telephone number

202

265

1292

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Wells Fargo Bank

Mailing Address

PO Box 63710

San Francisco

CITY

CA

STATE

94163

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address


CITY

STATE

ZIP CODE

13031141910

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

<input checked="checked" type="checkbox"/> Hand Delivered	Date of Receipt <i>11/27/13</i>
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify): <div style="text-align: right;">Next Business Day Delivery <input type="checkbox"/></div>	Shipping Date
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<div style="text-align: center;">  PREPARER </div>	<div style="text-align: center;"> <i>11/27/13</i> DATE PREPARED </div>

(8/2013)

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